

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUe FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or **Fax** (571)-273-2885

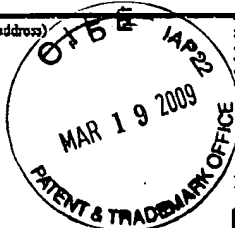
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

01/28/2009

Dennison Associates  
 133 Richmond Street West  
 Suite 301  
 Toronto, ON M5H2L7  
 CANADA



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUe FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

|                |                    |
|----------------|--------------------|
| M J Male       | (Depositor's name) |
| 7-ale          | (Signature)        |
| March 19, 2009 | (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/579,444      | 05/15/2006  | Manfred A. A. Lupko  | SWH 12 221-IUS      | 7844             |

TITLE OF INVENTION: PIPE MOLDING SYSTEM WITH VACUUM AND TEMPERATURE CONTROLS OF COOLING PLUGS

| APPLN. TYPE      | SMALL ENTITY | ISSUE FEE DUE  | PUBLICATION FEE DUE                        | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|------------------|--------------|----------------|--|----------------------|------------------|------------|
| nonprovisional   | YES          | \$755          | \$300                                      | \$0                  | \$1055           | 04/28/2009 |
| EXAMINER         | ART UNIT     | CLASS-SUBCLASS | 03/20/2009 HUONG2 00000023 040752 10579444 |                      |                  |            |
| LEYSON, JOSEPH S | 1791         | 425-336000     | 01 FC:2501                                 | 755.00 DA            | 300.00 DA        |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☐ Payment by credit card, Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 040752 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*S. Warren Hall*

Date

March 19, 2009

Typed or printed name

S. Warren Hall

Registration No.

30,350

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# DENNISON ASSOCIATES

SUITE 301  
133 RICHMOND STREET WEST  
TORONTO, ONTARIO, CANADA  
M5H 2L7

TELEPHONE: (416) 368-8313

FACSIMILE: (416) 368-1645

## FACSIMILE TRANSMISSION

### CONFIDENTIALITY NOTICE

THIS FACSIMILE COMMUNICATION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL PERSON OR ENTITY TO WHOM IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED AND CONFIDENTIAL. IF YOU ARE NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR THE AGENT RESPONSIBLE FOR DELIVERING THE COMMUNICATION TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY USE, DISCLOSURE, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS PROHIBITED. IF YOU HAVE RECEIVED THE FACSIMILE IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE (PHONE COLLECT) AND RETURN THE ORIGINAL FACSIMILE COMMUNICATION TO US AT THE ABOVE ADDRESS BY THE POSTAL SERVICE. THANK YOU.

DATE: March 19, 2009

FAX NO.: (571) 273-2885

TO: THE COMMISSIONER OF PATENTS AND TRADEMARKS


ATTN:

FROM: Warren Hall

TOTAL NO. OF PAGES

INCLUDING COVER SHEET IS: 2

**MESSAGE:** Please find enclosed U.S. Issue Fee Payment form for Application No. 10/579,444, which is to be charged to our Deposit Acct. 040752.

  
Agent on behalf of Applicant  
S. Warren Hall, Reg. No. 30,350  
Tel. (416) 368-8311, Ext. 133

Confirmation of facsimile to follow: ( ) Yes (X) No

IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL MJ AT (416) 368-8311 Ext. 0.



## DENNISON ASSOCIATES

SUITE 301  
133 RICHMOND STREET WEST  
TORONTO, ONTARIO, CANADA  
M5H 2L7

TELEPHONE: (416) 368-8313

FACSIMILE: (416) 368-1645

### FACSIMILE TRANSMISSION

#### CONFIDENTIALITY NOTICE

THIS FACSIMILE COMMUNICATION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL PERSON OR ENTITY TO WHOM IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED AND CONFIDENTIAL. IF YOU ARE NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR THE AGENT RESPONSIBLE FOR DELIVERING THE COMMUNICATION TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY USE, DISCLOSURE, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS PROHIBITED. IF YOU HAVE RECEIVED THE FACSIMILE IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE (PHONE COLLECT) AND RETURN THE ORIGINAL FACSIMILE COMMUNICATION TO US AT THE ABOVE ADDRESS BY THE POSTAL SERVICE. THANK YOU.

DATE: March 19, 2009

FAX NO.: (571) 273-2885


TO: THE COMMISSIONER OF PATENTS AND TRADEMARKS

ATTN:

FROM: Warren Hall

TOTAL NO. OF PAGES  
INCLUDING COVER SHEET IS: 2

**MESSAGE:** Please find enclosed U.S. Issue Fee Payment form for Application No. 10/579,444. which is to be charged to our Deposit Acct. 040752.

  
Agent on behalf of Applicant  
S. Warren Hall, Reg. No. 30,350  
Tel. (416) 368-8311, Ext. 133

Confirmation of facsimile to follow: ( ) Yes (X) No

IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL MJ AT (416) 368-8311 Ext. 0.